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TO:

Brian T. O'Connor
U.S. Patent and Trademark Office
Art Unit 2616
U.S. Appln. No. 10/606,753

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SENDER'S ASSISTANT:

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DATE:

October 11, 2007

CLIENT/MATTER NUMBER:

32172-188433

PAGES, EXCLUDING COVER:

15

MESSAGE:

As discussed in your telephone conversation with Michael Sartori, attached please find a copy each of the PTO date-stamped filing receipt, a Fee Transmittal, and a Response to Non-Final Office Action as filed with the U.S. Patent and Trademark Office on June 20, 2007.

Should you need to discuss this case further, please contact me at the above telephone number.

Sincerely,

Kyle D. Petaja

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PATENT PROSECUTION RECEIPT OF FILING

<p><u>1410397</u> Venable Filing Number Atty. Docket No: 32172-188433 Title of Application: SCHEDULING PACKETS FOR SWITCH MEMORY (PB 02 0011) Application No: 10/606,753 Patent No.: _____</p>	<p>Attorney/LAA: MAS/KDP/vlc PTO Due Date: June 20, 2007 Current Date: June 20, 2007 Filing Date: June 27, 2003 Issue Date: _____</p>
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The following items were received from Venable LLP, Washington, D.C., by the U.S. Patent & Trademark Office on the date stamped hereon:

U.S. PTO FEES ENCLOSED

<p>____ Transmittal Letter <input checked="" type="checkbox"/> Fee Transmittal Letter ____ New U.S. Patent Application (____ pages of specification/claims) ____ Rule 53(d) Continued Prosecution Application ____ Rule 53(b) Continuation or Divisional Application ____ (attach copy of specification, claims, drawings and declaration) ____ U.S. National Stage Application of PCT Application ____ Request for Continued Examination (RCE) under 37 CFR 1.114 ____ Application Data Sheet ____ Substitute Specification ____ Priority Document-Cert. Copy of Appin.#: _____; Country: _____; Date Filed: _____ ____ Formal Drawings (____ sheets, Figs.) ____ Inventor Declaration ____ Assignment w/Cover Sheet ____ Response to Notice to File Missing Parts ____ Response to Notice to File Missing Requirements ____ Response to Requirement ____ Information Disclosure Statement with cited references ____ Response <input checked="" type="checkbox"/> Amendment ____ Petition/Request for Extension of Time (mo. ext.) ____ Power of Attorney ____ Petition to Revoke ____ Sequence Listing - CDR Enclosed? ____ Yes ____ No ____ Request for Non-Publication ____ Request to Rescind Non-Publication Request ____ Terminal Disclaimer ____ Notice of Appeal ____ Appeal Brief <i>(In triplicate)</i> / Reply Brief <i>(In triplicate)</i> ____ Request for Oral Hearing ____ Confirmation of Hearing Petition ____ Issue Fee Transmittal ____ Certificate of Correction ____ Maintenance Fee Transmittal ____ Status Inquiry ____ Other: <i>(Please describe below)</i> _____ _____ _____ _____</p>	<p>____ Filing Fee ____ Search Fee ____ Examination Fee ____ Additional Claim Fee ____ Extension Fee ____ IDS Fee ____ Recordation Fee ____ Notice of Appeal Fee ____ Brief on Appeal ____ Oral Hearing Request Fee ____ Petition Fee ____ Issue Fee ____ Publication Fee ____ Certificate of Correction Fee ____ Maintenance Fee ____ Other Fees (Describe) _____ _____ _____ 0.00 Total Fees Paid</p>
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SJH

KAT

6/24/07

<p>Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</p> <h2 style="text-align: center;">FEE TRANSMITTAL</h2> <h3 style="text-align: center;">For FY 2007</h3>		<p style="text-align: center;">Complete if Known</p> <table border="1"> <tr> <td>Application Number</td> <td>10/606,753-Conf. #5555</td> </tr> <tr> <td>Filing Date</td> <td>June 27, 2003</td> </tr> <tr> <td>First Named Inventor</td> <td>Robert B. Magill</td> </tr> <tr> <td>Examiner Name</td> <td>B. O'Connor</td> </tr> <tr> <td>An Unit</td> <td>2616</td> </tr> <tr> <td>Attorney Docket No.</td> <td>32172-188433</td> </tr> </table>		Application Number	10/606,753-Conf. #5555	Filing Date	June 27, 2003	First Named Inventor	Robert B. Magill	Examiner Name	B. O'Connor	An Unit	2616	Attorney Docket No.	32172-188433
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<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27															
TOTAL AMOUNT OF PAYMENT (\$) 0.00															

<p>METHOD OF PAYMENT (check all that apply)</p> <p> <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ </p> <p> <input type="checkbox"/> Deposit Account Deposit Account Number: <u>22-0281</u> Deposit Account Name: <u>Venable LLP</u> </p> <p>For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)</p> <p> <input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments </p>	
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<p>FEE CALCULATION</p> <p>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</p> <table border="1"> <thead> <tr> <th rowspan="2">Application Type</th> <th colspan="2">FILING FEES</th> <th colspan="2">SEARCH FEES</th> <th colspan="2">EXAMINATION FEES</th> <th rowspan="2">Fees Paid (\$)</th> </tr> <tr> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>Utility</td> <td>300</td> <td>150</td> <td>500</td> <td>250</td> <td>200</td> <td>100</td> <td></td> </tr> <tr> <td>Design</td> <td>200</td> <td>100</td> <td>100</td> <td>50</td> <td>130</td> <td>65</td> <td></td> </tr> <tr> <td>Plant</td> <td>200</td> <td>100</td> <td>300</td> <td>150</td> <td>160</td> <td>80</td> <td></td> </tr> <tr> <td>Reissue</td> <td>300</td> <td>150</td> <td>500</td> <td>250</td> <td>600</td> <td>300</td> <td></td> </tr> <tr> <td>Provisional</td> <td>200</td> <td>100</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td></td> </tr> </tbody> </table> <p>2. EXCESS CLAIM FEES</p> <table border="1"> <thead> <tr> <th>Fee Description</th> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>Each claim over 20 (including Reissues)</td> <td>50</td> <td>25</td> </tr> <tr> <td>Each independent claim over 3 (including Reissues)</td> <td>200</td> <td>100</td> </tr> <tr> <td>Multiple dependent claims</td> <td>360</td> <td>180</td> </tr> </tbody> </table> <p> <u>Total Claims</u> <u>Extra Claims</u> <u>Fee (\$)</u> <u>Fee Paid (\$)</u> <u>Multiple Dependent Claims</u> <u>19</u> <u>- 20 =</u> <u>x</u> <u>=</u> <u>Fee (\$)</u> <u>Fee Paid (\$)</u> HP = highest number of total claims paid for, if greater than 20. </p> <p> <u>Indep. Claims</u> <u>Extra Claims</u> <u>Fee (\$)</u> <u>Fee Paid (\$)</u> <u>3</u> <u>- 3 =</u> <u>x</u> <u>=</u> HP = highest number of independent claims paid for, if greater than 3. </p> <p>3. APPLICATION SIZE FEE</p> <p>If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(O) and 37 CFR 1.16(s).</p> <table border="1"> <thead> <tr> <th>Total Sheets</th> <th>Extra Sheets</th> <th>Number of each additional 50 or fraction thereof</th> <th>Fee (\$)</th> <th>Fees Paid (\$)</th> </tr> </thead> <tbody> <tr> <td></td> <td>- 100 =</td> <td>/50 =</td> <td>(round up to a whole number) x</td> <td>=</td> </tr> </tbody> </table> <p>4. OTHER FEE(S)</p> <p>Non-English Specification. \$130 fee (no small entity discount)</p> <p>Other (e.g., late filing surcharge): _____</p>								Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Utility	300	150	500	250	200	100		Design	200	100	100	50	130	65		Plant	200	100	300	150	160	80		Reissue	300	150	500	250	600	300		Provisional	200	100	0	0	0	0		Fee Description	Fee (\$)	Small Entity Fee (\$)	Each claim over 20 (including Reissues)	50	25	Each independent claim over 3 (including Reissues)	200	100	Multiple dependent claims	360	180	Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fees Paid (\$)		- 100 =	/50 =	(round up to a whole number) x	=
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<p>SUBMITTED BY</p> <p>Signature: <u>Kyle D. Pelaja</u></p> <p>Name (Print/Type): <u>Kyle D. Pelaja</u></p>		<p>Registration No. (Attorney/Agent): <u>60,309</u></p>	<p>Telephone: <u>(202) 344-4000</u></p> <p>Date: <u>June 20, 2007</u></p>
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DC2/869806